

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

446235

FILING DATE

12-4-89

APPLICANT(S)

Brake C. et al

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51			
2	1						52			
3	1						53			
4	1						54			
5	1						55			
6	1						56			
7	1						57			
8	1						58			
9	1						59			
10	1						60			
11	1						61			
12	1						62			
13	1						63			
14	1						64			
15	2						65			
16	1						66			
17	2						67			
18	1						68			
19	1						69			
20	1						70			
21	1						71			
22	1						72			
23	1						73			
24	1						74			
25	1						75			
26	1						76			
27	1						77			
28	1						78			
29	1						79			
30	1						80			
31	1						81			
32	1						82			
33	1						83			
34	2						84			
35	1						85			
36	2						86			
37	1						87			
38	1						88			
39	1						89			
40	1						90			
41	1						91			
42	1						92			
43	1						93			
44	1						94			
45	1						95			
46	1						96			
47	1						97			
48	1						98			
49	1						99			
50	1						100			
TOTAL IND.	6						TOTAL IND.			
TOTAL DEP.	48						TOTAL DEP.			
TOTAL CLAIMS	54						TOTAL CLAIMS			